

2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N02000005796

FILED
Sep 10, 2003
Secretary of State

Entity Name: LATTER RAIN MINISTRIES, INC

Current Principal Place of Business:

825 NW 23RD AVENUE
SUITE 2D
GAINESVILLE, FL 32609

New Principal Place of Business:

Current Mailing Address:

PO BOX 290
LACROSSE, FL 32658

New Mailing Address:

FEI Number: FEI Number Applied For (X) FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

SOPHIA, CARTER SEC
825 NW 23RD AVENUE
SUITE 2D
GAINESVILLE, FL 32609 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: PHILLIPS, JANICE E
Address: 7202 W SR 235
City-St-Zip: LACROSSE, FL 32658

Title: VP () Delete
Name: PHILLIPS, ANTHONY
Address: 7202 W SR 235
City-St-Zip: LACROSSE, FL 32658

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: PHILLIPS, JANICE E
Address: 7202 W SR 235
City-St-Zip: LACROSSE, FL 32658

Title: D (X) Change () Addition
Name: PHILLIPS, ANTHONY
Address: 7202 W SR 235
City-St-Zip: LACROSSE, FL 32658

Title: D () Change (X) Addition
Name: THOMAS, SHIRLEY D
Address: 2213 N.E. 13TH STREET
City-St-Zip: GAINESVILLE, FL 32609

Title: T () Change (X) Addition
Name: JOHNSON, AUTHENIA
Address: 1210 NE 24TH STREET
City-St-Zip: GAINESVILLE, FL 32609

Title: T () Change (X) Addition
Name: MOZELL, SARAH
Address: 7202 W SR 235
City-St-Zip: LACROSSE, FL 32658

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JANICE E PHILLIPS

D

09/10/2003

Electronic Signature of Signing Officer or Director

Date